

5 TABLES/CHARTS THAT WILL BE HELPFUL IN YOUR WORK.

5.1 Checklist of Items Relating to Disciplinary Actions and Examples of Disciplinary Letters

As a convenience to State agencies, the Personnel Cabinet provides several checklists for agencies to use in reviewing disciplinary actions they process. Hopefully, the lists will provide a concise inventory of areas the agency needs to address prior to the processing of a disciplinary action. The Personnel Cabinet also uses the checklists to audit such documents and will assist agencies as much as possible in complying with the Personnel Board regulations. Agencies must note, however, that the final responsibility of compliance with the Personnel Board regulations rests with the agency initiating the action.

Dismissal--Status Employee

Intent to Dismiss--Example Letter #1

Dismissal--Example Letter #3

Dismissal--Non-Status Employee on Initial Probation

Example Letter #4

Suspension/Dismissal--Employee Serving Initial Probation

Example Letter #5

Suspension--Status Employee

Example Letter #6

Suspension--Employee Serving Initial Probation

Example Letter #7

Involuntary Transfer--Status Employee

Same County--Example Letter #8

Different County--Example Letter #9

Demotion for Cause--Status Employee

Example Letter #10

Reversion of Status Employee from Promotional Probation

Example Letter #11

Written Reprimand--Status or Non-Status Employee

Example Letter #12

Special Leave With Pay For Investigative Purposes--Status or Non-Status Employee

Example Letter #13

Disciplinary Fine--Status Employee

Example Letter #14

Disciplinary Fine--Non-Status Employee on Initial Probation

Example Letter #15

Dismissal--All Unclassified Employees

Example Letter #16

Resignation--Status or Non-Status Employee--Example Letter #17

Status or Non-Status Employee – Example Letter #17A

Status Employee Example Letter #17B

Appeal Form #18

Pre-Termination Hearing Request Form #19

Voluntary Transfer or Voluntary Demotion Form #20

Grievance Form #21

Example 12.050 Letter #22

Work County Change Form #23

Example 12.210 Letter #24

Notification of Reallocation Form #25

KAR & KRS REGULATION REFERENCE	DISMISSAL--Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
18A.095	1.	Does the employee have status?	
18A.095	2.	Prior to dismissal, was employee notified in writing by the cabinet head or his designee, of intent to dismiss?	
	3.	Did notice of intent state: specific reasons for intended dismissal?	
	4.	statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	5.	specific action or activity on which intended dismissal is based?	
	6.	• date, time, place of action?	
	7.	names of parties involved?	
	8.	that the employee has right to appear personally, or with counsel at a pre-termination hearing to reply to the head of the cabinet or agency or his designee or appointing authority?	
	9.	If suspension preceded dismissal, was notice of suspension in compliance with 18A.095?	
18A.095	10.	Did notice of intent include a request for pre-termination hearing form? (This form contains instructions on how to apply for a pre-termination hearing.)	*
18A.095	11.	Was determination to dismiss made within 5 working days of pre-termination hearing, excluding the day of the hearing?	*
	12.	Was the employee notified in writing of the decision and reasons therefore?	*
	13.	If no request for a pre-termination hearing was received from the employee, did the appointing authority notify employee that his right to such a hearing had been waived?	*

KAR & KRS REGULATION REFERENCE	DISMISSAL -- Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
18A.095	14.	Was employee notified in writing of reasons for dismissal? (please do not include these by simple reference to the letter of intent; please restate them in the letter): effective date of dismissal?	
	15.	specific reasons for dismissal?	
	16.	statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	17.	specific action or activity on which dismissal is based?	
	18.	date, time, place of action or activity?	
	19.	names of parties involved?	
	20.	Was an appeal form attached to the notice?	*
18A.095	21.	Was employee notified of his right to appeal within 60 days of receipt of notice, excluding the date of receipt of notice?	
	22.	Was notice received by employee prior to effective date of dismissal?	*
1:345, Section 2(2)	23.	At the time of notification of the action, were copies of all related documents sent to Secretary of Personnel (Processing Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
	24.	A statement concerning why offense was relevant to effectiveness and efficiency of the agency is recommended.	
Other			

*Required, but cannot be audited by the Personnel Cabinet.

EXAMPLE LETTER #1--INTENT TO DISMISS-STATUS EMPLOYEE

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.095, this is to advise you of the intent of the appointing authority to dismiss you effective close of business **[Date]**, from your position of **[Job Title]**, with the **[Organizational Unit]**.

Pursuant to **[cite law or regulation violated, including 101 KAR 1:345, Section 1 and KAR 2:095, Section 2]**, and based upon review of your employment record and the recommendation of the Department, I find probable cause to believe that your dismissal is justified based upon the following specific reason:

**Example
Only**

[Poor time and attendance record, i.e., as reported by _____, since receiving a verbal warning for this on January 13, 1986, a verbal reprimand for this on August 14, 1986, a written reprimand for this dated August 26, 1986, a three (3) day suspension for this from November 10 through November 14, 1986, and a five (5) day suspension for this from March 15 through March 19, 1987, you have continued your poor record as evidenced by your unauthorized absences on the following dates: June 12, 13, & 14, 1987. In addition, you had un-excused tardiness on the following dates: April 19 (.75 hours), & 25 (2.25 hours); May 3 (1.25 hours), & 19 (.25 hours); and, June 23, 1987 (.75 hours). This is a violation of 101 KAR 2:095, Section 2 and 101 KAR 2:102, Sections 2 & 9.] Unauthorized or unreported absences are disruptive to the efficient delivery of services.

You have the right to request a pre-termination hearing in order to show cause, if any you can, as to why the intended dismissal should not be imposed by the appointing authority. Such request must be made by completing the attached "Pre-termination Hearing Request Form" and returning it within five (5) working days, excluding the day you receive this notice, to **[the Appointing Authority or Designee, Address]**.

Failure to request and/or attend a scheduled pre-termination hearing on the appointed date may result in a determination that the above described charge is true and the imposition of your dismissal.

This is not notice of final action and does not affect any appeal rights which may accrue in the event of your dismissal.

Sincerely,

[Cabinet Head or his designee]

Attachment **(Pre-termination Hearing Request Form)**

copy to: Secretary, Personnel Cabinet
Personnel File

EXAMPLE LETTER #3--DISMISSAL--STATUS EMPLOYEE

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Having considered all statements made on your behalf during your pre-termination hearing held on **[Date]**, I have determined that the clear weight of the evidence establishes that you committed the charges as outlined in my letter to you dated **[Date]**.

Therefore, based on the authority of KRS 18A.095, you are hereby notified that you are officially dismissed from duty and pay effective **[Date]**.

You are being dismissed from your position for violation of **[cite law or regulation violated, such as 101 KAR 1:345, Section 1 and 101 KAR 2:095, Section 2]**, for the specific reasons outlined in my letter to you dated **[Date]**, and these reasons are again indicated as follows: **[State specific reasons]**.

In accordance with KRS 18A.095, you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the date notification is received. Such appeal must be filed in writing using the attached appeal form and in the manner prescribed on the form.

Sincerely,

[Cabinet Head or his designee]

Attachments (**Appeal Form**)

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	DISMISSAL--Non-Status Employee on Initial Probation*		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
KRS 18A.111	1.	Is the employee a non-status employee?	
	2.	Did the employee receive notice prior to the end of his initial probationary period that he is dismissed from his position?	
1:325, Section 1(1)	3.	Was the initial probationary period computed from the effective date of appointment to the corresponding date in the sixth month following appointment?	
KRS 18A.111	4.	Was employee notified in writing prior to the effective date of the dismissal? (The effective date of such dismissal may be after the date when the employee would have completed the initial probationary period, if this is necessary to comply with the requirement of subsection (4) of this section of regulations and the employee may be entitled to pay for the days notice was not given.)	
	5.	Was the notice signed by the appointing authority or designee? [See KRS 18A.111]	
	6.	Did the notification advise the employee of the effective date?	
	7.	At the time of notification, were copies of the notice forwarded to the Secretary of Personnel, (Processing Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
Other			

*Transfers during the initial probationary period will not be approved unless there is a demonstration of a compelling need to do so.

EXAMPLE LETTER #4--DISMISSAL--INITIAL PROBATION

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.111, you are advised you will be terminated from the position of **[Job Title]**, effective close of business **[Date]**.

As an employee serving an initial probationary period as provided by KRS 18A.111, you do not have the right to appeal this action except as provided by KRS 18A.095.

Sincerely,

[Appointing Authority or Authorized Designee]

copy to: Secretary, Personnel Cabinet
 Personnel File

KAR & KRS REGULATION REFERENCE	SUSPENSION/DISMISSAL--Employee Serving Initial Probation		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
KRS 18A.111	1.	Is employee on initial probation?	
	2.	Was notification sent prior to the effective date of the suspension?	
	3.	Was notification of suspension signed by the appointing authority or designee?	
1:345, Section 4(2)	4.	Was suspension thirty working days or less?	
KRS 18A.095	5.	Did notification state: the effective date of the suspension?	
	6.	the specific reason for the suspension, including the statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	7.	the specific action or activity on which the suspension is based?	
	8.	the date, time and place of action or activity?	
	9.	the name of the parties involved?	
1:345, Section 4(3)	10.	At the time of notification, were copies of the notice sent to the Secretary of Personnel (Processing Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
	11.	A statement concerning why offense was relevant to effectiveness and efficiency of the agency is recommended.	
Other			

EXAMPLE LETTER #5--SUSPENSION/DISMISSAL--INITIAL PROBATION

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.111 and KRS 18A.095, you are notified that you are suspended from duty and pay effective at the beginning of business on **[Date]**, and continuing until the close of business on **[Date]**, at which time you will be dismissed from your position.

You are being suspended from your position for violation of **[cite law or regulation violated, such as 101 KAR 1:345, Section 1 and 101 KAR 2:095, Section 2]**. In accordance with KRS 18A.095 and 101 KAR 1:345, Section 4(2), an employee without status does not have a right to appeal a suspension to the Personnel Board unless it is alleged that the action is in violation of the anti-discrimination provisions of KRS 18A.140.

You are being dismissed from your position as **[Job Title]**, in the **[Organizational Unit]**. As an employee without status, you do not have the right to appeal this dismissal except as provided by KRS 18A.095.

Sincerely,

[Appointing Authority or Authorized Designee]

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	SUSPENSION--Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
KRS 18A.095	1.	Does the employee have status?	
1:345, Section 4(1)	2.	Was the suspension thirty working days or less?	
KRS 18A.095	3.	Was notification sent prior to the effective date of the suspension?	
	4.	Was the notice signed by the appointing authority or designee?	
	5.	Did notification state: the effective date of the suspension?	
	6.	the specific reason for the suspension, including the statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	7.	the specific action or activity on which the suspension is based?	
	8.	the date, time and place of action or activity?	
	9.	the name of the parties involved?	
	10.	Did it advise the employee of his right to appeal within 60 days after receipt of notice, excluding the day he receives the notification?	
	11.	Was an appeal form attached to notice?	*
1:345, Section 4(3)	12.	At the time of notification, were copies of the notice sent to the Secretary of Personnel (Processing Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
	13.	A statement concerning why offense was relevant to effectiveness and efficiency of the agency is recommended.	
	14.	If the employee is FLSA exempt, the suspension must be at least five (5) working days unless the reason involves a major safety violation.	
Other			

*Required, but cannot be audited by the Personnel Cabinet.

EXAMPLE LETTER #6--SUSPENSION--STATUS EMPLOYEE

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to 18A.095 you are notified that you are suspended from duty and pay for a period of three (3) working days, effective beginning of business on **[Date]**, through the close of business on **[Date]**.

Pursuant to **[cite law or regulation violated, such as 101 KAR 1:345, Section 1 and 101 KAR 2:095, Section 2]**, you are being suspended from your position as **[Job Title]**, in the **[Organizational Unit]**, for the following reason:

**Example
Only**

[Poor time and attendance record, i.e., as reported by _____, since receiving oral coaching for this on February 24, 1987, a verbal reprimand for this on March 25, 1987, and a written reprimand for this dated April 7, 1987, you had continued your poor record as evidenced by your un-excused tardiness (30 minutes) on July 12, 1987. This is a violation of 101 KAR 2:095, Section 2, and 101 KAR 2:102, Sections 2 & 9.]

In accordance with KRS 18A.095, you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the date notification is received. Such appeal must be filed in writing using the attached appeal form and in the manner prescribed on the form.

Sincerely,

[Appointing Authority or Authorized Designee]

Attachment (**Appeal Form**)

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	SUSPENSION--Employee Serving Initial Probation		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
18A.111	1.	Is employee on initial probation?	
	2.	Was notification sent prior to the effective date of the suspension?	
	3.	Was notification of suspension signed by the appointing authority or designee?	
1:345, Section 4(2)	4.	Was suspension thirty working days or less?	
18A.095	5.	Did notification state: the effective date of the suspension?	
	6.	the specific reason for the suspension, including the statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	7.	the specific action or activity on which the suspension is based?	
	8.	the date, time and place of action?	
	9.	the name of the parties involved?	
1:345, Section 4(3)	10.	At the time of notification, were copies of the notice sent to the Secretary of Personnel (Processing Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
	11.	A statement concerning why offense was relevant to effectiveness and efficiency of the agency is recommended.	
Other			

EXAMPLE LETTER #7--SUSPENSION--INITIAL PROBATION

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.095 and 101 KAR 1:345, Section 4(2), you are advised that you will be suspended without pay for cause from your position as **[Job Title]** for **[Number]** working days effective beginning of business **[Date]** to close of business **[Date]**. The days you are scheduled to be off work during this time period are **[Specify]**. You are to return to work at your regularly scheduled time on **[Date]**.

You are suspended for violation of **[cite law or regulation violated, such as 101 KAR 1:345, Section 1, and 101 KAR 2:095, Section 2, unsatisfactory performance]** specified as follows:

**Example
Only**

[Specifics of the reason for the suspension including the statutory or regulatory violation, the specific actions or activity on which the suspension is based, the date, time and place of the action or activity and the names of the parties including any witnesses.]

As an employee without status, you do not have the right to appeal this action except as provided by KRS 18A.095.

Sincerely,

[Appointing Authority or Authorized Designee]

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	INVOLUNTARY TRANSFER--Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
1:335, Section 4(1)	1.	Does the employee have status?	
1:335, Section 4(3)	2.	Was notification sent prior to the effective date of the transfer?	
	3.	Did the employee report to work on the effective date of the transfer?	*
	4.	Did the notice of involuntary transfer, which must be writing, state: the effective date of the transfer?	
	5.	reason for the transfer?	
	6.	the employee's selection for transfer?	
	7.	the employee's obligation to report to the new position?	
1:335, Section 4(4)	8.	If the involuntary transfer is to a position with a work station in a different county, did the employee receive notice of the transfer at least 30 days prior to the effective date of the transfer? The notice must also advise the employee that the appointing authority shall pay the employee's travel expenses following transfer for up to thirty (30) days following the effective date of transfer, in accordance with administrative regulations relating to reimbursement of travel expenses, and shall pay the employee's moving expenses, if any.	
1:335, Section 4(5)	9.	Was the involuntary transfer intra-agency only?	
18A.095	10.	Was the employee notified of his right to appeal to the Board within sixty (60) days of receipt of notice of transfer, excluding the day he received notification?	
Other			

*Required, but cannot be audited by the Personnel Cabinet

EXAMPLE LETTER #8--INVOLUNTARY TRANSFER--STATUS EMPLOYEE SAME COUNTY

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Effective beginning of business **[Date]** you are transferred from your current position of **[Job Title]**, **[Position Number]**, or **[Location]** to **[Job Title]**, **[Position Number]**, or **[Location]**. It is your responsibility by Personnel Regulation 101 KAR 1:335, Section 4(3) to report to your new position on **[Same effective date as above]**.

The reason for this transfer is **[State reason here]**. The basis for your selection for this transfer is **[State reasonable basis for selection here]**.

In accordance with KRS 18A.095, as a classified employee with status you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the date notification is received. Such appeal must be filed in writing using the attached appeal form and in the manner prescribed on the form.

Sincerely,

[Appointing Authority or Authorized Designee]

Attachment (**Appeal Form**)

copy to: Secretary, Personnel Cabinet
Personnel File

EXAMPLE LETTER #9--INVOLUNTARY TRANSFER--STATUS EMPLOYEE DIFFERENT COUNTY

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to 101 KAR 1:335, Section 4, you are notified that effective **[Date]**, you will be transferred from your current station of **[Location]** to a new work station of **[Location]**. As required by 101 KAR 1:335, Section 4(4), because this is an involuntary transfer to a new work station in a different county, the **[Organizational Unit]** shall pay the employee's travel expenses following the effective date of this transfer for up to thirty (30) calendar days and shall pay the employee's moving expenses, if any, in accordance with the appropriate Kentucky Administrative Regulations.

This transfer has been recommended by the **[Organizational Unit]** due to the following reason:

Example Only **[This transfer has been recommended by the Division of Food Testing of the Department for Sanitation due to the over-staffing in the region in which you are presently assigned. The number of dairy farms, processing plants and receiving/transfer stations has substantially reduced the workload. Additionally, the "Whole Milk Review Program" will, when completed in August, 1987, reduce dairy farms in Kentucky by 399. As a result of this workload reduction, staff positions within the Control Branch have also been reduced or adjusted statewide to reflect shifts and changes in work requirements.]**

You are obligated to report to your new work station on the effective date of this involuntary transfer.

In accordance with KRS 18A.095, you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the date notification is received. Such appeal must be filed in writing using the attached appeal form and in the manner prescribed on the form.

Sincerely,

[Appointing Authority or Authorized Designee]

Attachment (**Appeal Form**)

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	DEMOTION FOR CAUSE--Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
18A.095	1.	Does employee have status?	
	2.	Was the employee notified in writing, signed by the appointing authority or designee, prior to the effective date of the demotion?	
	3.	Did notice of demotion state: the effective date of the demotion?	
	4.	statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	5.	specific action or activity on which the demotion is based?	
	6.	the date, time and place of action or activity?	
	7.	the names of the parties involved, including any witnesses?	
	8.	Was the employee informed of his right to appeal demotion within 60 days after receipt of notice, excluding the date of receipt of notice?	
	9.	Was there an appeal form attached to the notice?	*
1:345, Section 3	10.	At the time of notification, was a copy of the notice sent to Secretary of Personnel (Processing Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5 th Floor, 200 Fair Oaks Lane)?	
	11.	A demotion may also be based on a "no fault" rationale such as a reorganization. If this is the case, please state that the action is not disciplinary in character.	
Other			

*Required, but cannot be audited by the Personnel Cabinet

EXAMPLE LETTER #10--DEMOTION FOR CAUSE--STATUS EMPLOYEE

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.095, you are advised that you will be demoted for cause from your position as **[Job Title]** to the position of **[Job Title]** effective beginning of business **[Date]**.

You are demoted for violation of **[cite law or regulation violated, such as 101 KAR 1:345, Section 1, and 101 KAR 2:095, Section 2, unsatisfactory performance]** specified as follows:

**Example
Only**

[Specifics of the reasons for the demotion including the statutory or regulatory violation, the specific action or activity on which the demotion is based, the date, time and place of such action or activity and the names of the parties including any witnesses.]

In accordance with KRS 18A.095, you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the date notification is received. Such appeal must be filed in writing using the attached appeal form and in the manner prescribed on the form.

Sincerely,

[Appointing Authority or Authorized Designee]

Attachment (**Appeal Form**)

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	REVERSION of Status Employee From Promotional Probation		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
1:325, Section 2	1.	Does the employee have status in the former position?	
	2.	Did notice of reversion state: the effective date of reversion?	
	3.	that failure to complete a promotional probationary period for unsatisfactory performance is not appealable except as provided in 18A.095?	
	4.	At the time of notification of the reversion, was a copy sent to the Secretary of Personnel (Processing & Records Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5 th Floor, 200 Fair Oaks Lane)?	
Other			

EXAMPLE LETTER #11--REVERSION--PROMOTIONAL PROBATIONARY PERIOD

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to 101 KAR 1:325, Section 2, you will be reverted to your former position of **[Job Title]** effective **[Date]** because you have failed to satisfactorily complete your promotional probationary period.

You do not have the right to appeal this action except as provided in KRS 18A.095.

Sincerely,

[Appointing Authority or Authorized Designee]

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	WRITTEN REPRIMAND--Status or Non-Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
KRS 18A.020	1.	Is the employee's social security number indicated on the reprimand? (This is for administrative convenience in assuring that the document is routed to the correct file.)	
	2.	Was the reprimand signed by the appointing authority, or his designee, an intermediate supervisor, a division director, or employee's supervisor?	
	3.	Was the reprimand documented in detail? (Note: In addition to "detailed documentation," a specific law or regulation citation is desirable but not required.)	
	4.	Does the reprimand include notice to the employee of his right to respond in writing to the reprimand?	
	5.	Does the reprimand advise the employee that the reprimand, documentation and his response will be placed in his personnel file?	
	6.	Were copies of the reprimand, documentation and employee's response forwarded to the Processing & Records Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5 th Floor, 200 Fair Oaks Lane?	
Other			

EXAMPLE LETTER #12--WRITTEN REPRIMAND

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Employee Social Security Number

[Documentation of the written reprimand in detail included here.]

According to KRS 18A.020, you may, if you choose, respond to this reprimand in writing. A copy of your response will be placed with the reprimand and the supporting documentation in your personnel file in this agency and your personnel file maintained by the Personnel Cabinet. A written reprimand, in and of itself, is not an appealable penalization.

Sincerely,

[Appointing Authority or Authorized Designee, Intermediate Supervisor, Division Director, or Immediate Supervisor]

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	SPECIAL LEAVE WITH PAY PENDING INVESTIGATION--Status or Non-Status Employee¹		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
KRS 18A.110	1.	Does the employee have status?	
2:102, Section 8(3) or 3:015, Section 8(3)	2.	Was the placement on leave without pay for a period of 60 or fewer working days?	
	3.	Was the notice signed by the appointing authority or designee?	
	4.	Did the notification of placement on leave state: that the employee is being placed on leave?	
	5.	the reasons therefor?	
	6.	It is advisable to attach a grievance form and an appeal form, since the employee may have the right to appeal based on the penalization rule.	*
2:102, Section 8(3) or 3:015, Section 8(3)	7.	Did the appointing authority notify the employee in writing of: the completion of the investigation?	
	8.	the action taken?	
	9.	If the investigation revealed no misconduct on behalf of the employee: was he made whole for the period of such leave?	
	10.	were all records relating to the investigation purged from agency and Personnel Cabinet files?	
	11.	If the investigation revealed misconduct, were standard regulations regarding disciplinary actions followed? Personnel action returning the employee from special leave of absence without pay.	
	12.	Suspensions or other disciplinary measures would be completed using separate personnel action forms. For example, a suspension of "X" days without pay might follow. If the period of placement on leave pending investigation were a part of the suspension, "notice" will have been given through item 5 above.	
Other			

*Cannot be audited by the Personnel Cabinet.

¹101 KAR 2:102--Classified Regulations
101 KAR 3:015--Unclassified Regulations

EXAMPLE LETTER #13--SPECIAL LEAVE WITH, FOR INVESTIGATIVE PURPOSES

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to 101 KAR 2:102¹, Section 8, you will be placed on special leave with pay for a period not to exceed sixty (60) working days effective **[Date]**, pending further investigation of the allegations below. You will be further notified of the outcome of this investigation and of any disciplinary action taken as a result of this investigation. If the investigation reveals no misconduct by you, all records relating to the investigation will be purged from the **[Organizational Unit]** and Personnel Cabinet files.

You are being placed on leave with pay for investigative purposes for the following offense:

Example Only **[On Thursday, August 13, 1987, at approximately 8:10 am, while on duty as a Job Title, you were arrested by Kentucky State Police Detective ____ at Location, for unlawfully taking money from the premises.]**

If this allegation is support by the investigation it would be in violation of Personnel Regulation 101 KAR 1:345, Section 1 and 101 KAR 2:095, Section 2.

Sincerely,

[Appointing Authority or Authorized Designee]

Attachment (**Appeal Form and Grievance Form**)

copy to: Secretary, Personnel Cabinet
 Personnel File

¹For Classified employee, reference should be 101 KAR 2:102. For Unclassified, use 101 KAR 3:015.

KAR & KRS REGULATION REFERENCE	DISCIPLINARY FINE--Status Employee		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
	1.	Does the employee have status?	
1:345, Section 5(1)	2.	Is the fine computed on the basis of the employee's current salary?	
1:345, Section 5(2)	3.	Prior to the imposition of the fine, was the employee notified by the appointing authority or designee in writing of the amount of the fine?	
1:345, Section 5(3)	4.	Is the fine 10 or fewer days' pay?	
18A.095	5.	Did notice of disciplinary fine state: the amount of the fine?	
	6.	statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	7.	the manner of imposing the fine?	
	8.	the action or activity on which the fine is based?	
	9.	the date, time and place of action or activity?	
	10.	the names of the parties involved?	
	11.	Was employee informed of his right to appeal the fine within 60 days of receipt of notice, excluding the date of receipt of notice?	
1:345, Section 5(4)	12.	At the time of notification of fine, were copies of all related documents sent to Secretary of Personnel (Files Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
	13.	Was an appeal form attached?	*
	14.	A statement concerning the relationship of the offense to the job is recommended.	
Other			

*Required, but cannot be audited by the Personnel Cabinet

EXAMPLE LETTER #14--DISCIPLINARY FINE--STATUS EMPLOYEE

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.095(1) and (8), and 101 KAR 1:345, Section 5, you are hereby notified that you are officially fined in the amount of **[\$ amount]**, [a sum equal to __ days pay based on your current salary of \$__ per month]. You must remit a certified check or money order for this amount made payable to the Kentucky State Treasurer. Your failure to comply with this requirement may result in further disciplinary action up to and including dismissal. The mailing address is: **[provide complete mailing address.]**

Pursuant to **[cite law or regulation violated, such as 101 KAR 1:345 and 101 KAR 2:095, Section 2,]** you are being fined in your position as **[position title]** in the **[job location]** for the following reason: **[specifics of the reasons for the fine including the specific action or activity on which the fine is based, the date, time and place of such action or activity and the names of the parties including any witnesses.]**

A copy of this notice is being furnished to the Personnel Cabinet in accordance with personnel rules. As an employee with status, you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the date notification is received. Such appeal must be filed in writing using the attached appeal form and in the manner prescribed on the form.

Sincerely,

[Appointing Authority or Authorized Designee]

Attachment **(Appeal Form)**

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	DISCIPLINARY FINE--Non-Status Employee on Initial Probation		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
1:345, Section 5(3)	1.	Is the employee on initial probation?	
1:345, Section 5(1)	2.	Is the fine computed on the basis of the employee's current salary?	
1:345, Section 5(2)	3.	Prior to the imposition of the fine, was the employee notified by the appointing authority or designee in writing of the amount of the fine?	
1:345, Section 5(3)	4.	Is the fine 10 or fewer days' pay?	
18A.095	5.	Did notice of disciplinary fine state: the amount of the fine?	
	6.	statutory or regulatory violation? Examples of statutes or regulations that may relate to the action are: 1:345 Section 1--General Provision. Appointing authorities may discipline employees for lack of good behavior or the unsatisfactory performance of duties. 2:095 Section 2--relating to attendance, hours of work 2:102 Section 2--relating to sick leave 2:102 Section 9--relating to absence without leave Whatever law/regulation that applies must be cited.	
	7.	the manner of imposing the fine?	
	8.	the action or activity on which the fine is based?	
	9.	the date, time and place of action or activity?	
	10.	the names of the parties involved?	
1:345, Section 5(4)	11.	At the time of notification of fine, were copies of all related documents sent to Secretary of Personnel (Files Branch, Department for Personnel Administration, Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane)?	
	12.	A statement concerning the relationship of the offense to the job is recommended.	
Other			

NOTE: Employers should make themselves aware of KRS 337.060.

**EXAMPLE LETTER #15--DISCIPLINARY FINE--NON-STATUS EMPLOYEE ON INITIAL
PROBATION**

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Pursuant to KRS 18A.095(1) and (8), and 101 KAR 1:345, Section 5, you are hereby notified that you are officially fined in the amount of **[\$ amount]**, [a sum equal to __ days pay based on your current salary of \$__ per month]. You must remit a certified check or money order for this amount made payable to the Kentucky State Treasurer. Your failure to comply with this requirement may result in further disciplinary action up to and including dismissal. The mailing address is: **[provide complete mailing address.]**

Pursuant to **[cite law or regulation violated, such as 101 KAR 1:345 and 101 KAR 2:095, Section 2,]** you are being fined in your position as **[position title]** in the **[job location]** for the following reason: **[specifics of the reasons for the fine including the specific action or activity on which the fine is based, the date, time and place of such action or activity and the names of the parties including any witnesses.]**

As an employee without status under the merit system, you may not appeal this action to the State Personnel Board, except as provided in KRS 18A.095.

Sincerely,

[Appointing Authority or Authorized Designee]

copy to: Secretary, Personnel Cabinet
Personnel File

KAR & KRS REGULATION REFERENCE	DISMISSAL--All Unclassified Employees		
	#	Checklist of items required by personnel regulations as related to disciplinary letters, P-1s and associated documents. An answer of "No" (N) to any question may indicate there is a compliance problem.	Yes/No (Y/N)
18A.095	1.	Is the employee in an unclassified position?	
18A.095	2.	Citation of the proper statute or regulation as procedural authority for the action taken is recommended.	
18A.095	3.	Did the appointing authority provide written notice of the removal of the employee for cause, or without cause? (The notice must be received by the employee prior to dismissal, but it may be on the same date as the effective date of the personnel action.*)	
	4.	If the dismissal is for cause, did the notice state the employee may appeal to the Personnel Board? KRS 18A.095 states: "Any unclassified employee who is dismissed, demoted, suspended, or otherwise penalized for cause may appeal to the Personnel Board for review within 60 days after such action."	
	5.	If the dismissal was for cause, did the notice state the reasons for the dismissal?	
18A.095 or 18A.115	6.	If the dismissal was without cause and if the employee was promoted from the classified service, was the employee reverted to a position in the class in which he had status in the agency from which terminated, if a vacancy in that class exists? Note: career employees and employees promoted prior to July 15, 1986 are eligible for reversion rights.	
	7.	If the dismissal was without cause, and if no such vacancy (as described in #6) exists, were layoff and/or re-employment procedures applied?	
Other			

*Required, but cannot be audited by the Personnel Cabinet.

EXAMPLE LETTER #16--DISMISSAL WITHOUT CAUSE--ALL UNCLASSIFIED EMPLOYEES

Note: If this is a career employee, refer to 18A.095 before dismissing.

[Date]

[Employee's Address]

Dear **[Name of Employee]**

Effective **[Date]**, your services as a **[Job Title]** are no longer needed.

If the employee is a career employee with prior merit status and a vacant position is available in the class in which he previously held status, add:

"As a career employee with prior merit status in **[Class]**, you are reverted to **[Position]** at **[Work Site]**. You are directed to **[Supervisor]** for assignment of duties on **[Date]**. Your reversion salary is **[\$_____]** per month."

If the employee is a career employee with prior merit status but there is no vacant position in the agency in that class, add:

"Because there is no vacant position in the class **[Class]**, you are not being reverted. However, the Personnel Cabinet has been notified to place you on reemployment lists for **[Class]**. You may be placed on reemployment lists for other classes upon written request and completion of the appropriate qualification process."

Sincerely,

[Appointing Authority or Authorized Designee]

copy to: Secretary, Personnel Cabinet
Personnel File

**EXAMPLE LETTER #17--ABSENCE WITHOUT LEAVE--
Classified Employee--101 KAR 2:102, Section 9(3) OR
Unclassified Employee--101 KAR 3:015, Section 9(3)**

[Date]

[Employee's Address]

Dear **[Name of Employee]**

You have been absent without approved leave since [date]. According to the Kentucky Administrative Regulation 101 KAR 2:102, Section 9 (3):

An employee who has been absent without leave or notice to the supervisor for a period of ten (10) working days shall be considered to have resigned his/her employment.

Therefore, based on the authority of KRS 18A.095 (2) and (3) and 101 KAR 2:102, Section 9 (3), you are hereby notified that you are officially resigned from your position as [position title] in the [department/agency name] in [city], Kentucky, effective [date].

In accordance with 101 KAR 1:345, Section 1, you are being resigned from your position for the following specific reason:

Unauthorized Absence from the Workplace, i.e., (summarization of absences and attempts of contact the employee).

A copy of this notice is being furnished to the Personnel Cabinet in accordance with personnel rules. As an employee with status, you may appeal this action to the Personnel Board within sixty (60) days after receipt of this notice, excluding the day of receipt. Appeals must be made by completing the attached form and directing it to the address indicated on the form. (See KRS 18A.095 and 101 KAR 1:265, Appeal and Hearing Procedures).

Sincerely,

[Appointing Authority]

Attachment

Cc: Personnel Cabinet
Personnel File

**EXAMPLE LETTER #17A--ABSENCE WITHOUT LEAVE--
Classified Employee--101 KAR 2:102, Section 9(3) OR
Unclassified Employee--101 KAR 3:015, Section 9(3)**

November 9, 1999

Ms.xxxxx
406-11-xxxx
11301 Powhatan Ct. #1
Louisville, KY 40241

Dear Ms. xxxxxx:

This is official notice that pursuant to 101 KAR 2:102, Section 9, Absence Without Leave, you will be terminated from state employment by resignation effective close of business November 15, 1999.

Your attendance records verify that you have been absent from employment as an Executive Staff Advisor with the Kentucky xxxxxx Council, since October 29, 1999 without leave or notice to your supervisor.

You were mailed a notice on November 3rd that advised you that you were absent without leave and directed to return to work, which you failed to do. According to 101 KAR 2:102, Section 9 (3), an employee who has been absent without leave or notice to his or her supervisor for a period of ten (10) working days shall be considered to have resigned his employment.

If there is any reason that you believe this action is not justified, you may request to appear personally to show cause as to why you should not be processed as a resignation; however, this appointment must be made with me prior to the close of business (4:30 p.m.) on Monday, November 15, 1999.

Pursuant to KRS 18A.095, you may have the right to appeal this action to the Kentucky Personnel Board. If you wish to exercise this right, submit the attached form to the Kentucky Personnel Board within sixty (60) days of receipt of this notice.

Sincerely,

David L. XXXXX, Executive Director
Kentucky XXXXXXXX

Attachment – Appeal Form

Cc: Secretary, Personnel Cabinet
Personnel File

**EXAMPLE LETTER #17B--ABSENCE WITHOUT LEAVE--
Classified Employee--101 KAR 2:102, Section 2(3)(g)**

October 01, 2003

Ms. xxxxxxxx
406-xx-xxxx
106 Main St.
Frankfort, KY 40601

Dear Ms. xxxxxxxx:

This is official notice that pursuant to 101 KAR 2:102 Section 2 (3)(g), you are considered to have resigned your position as Administrative Specialist III with the Kentucky xxxxx Council effective October xx, 2003.

Kentucky Administrative Regulation 101 KAR 2:102 Section 2(3)(g) states;

An employee is considered to have resigned if he has been on one (1) year continuous sick leave without pay.

Pursuant to KRS 18A.095, you may have the right to appeal this action to the Kentucky Personnel Board. If you wish to exercise this right, submit the attached form to the Kentucky Personnel Board within sixty (60) days of receipt of this notice. If you would like to meet with me personally, or with counsel to discuss this matter prior to the projected effective date of your resignation, please contact me at (xxx-xxx-xxxx)

Sincerely,

David L. XXXXXXXXX, Executive Director
Kentucky XXXXXXXXX

Attachment – Appeal Form
CC: Secretary, Personnel Cabinet

APPEAL FORM*****ALL APPEALS TO THE PERSONNEL BOARD MUST BE ON THIS FORM*****

This appeal to the Kentucky Personnel Board is hereby filed pursuant to the provisions of KRS Chapter 18A. The following information is provided as required by law.

For Official Use Only

NAME: _____				
(LAST)	(FIRST)	(MIDDLE)	(MAIDEN)	(SOC. SEC. NO.)
HOME ADDRESS: _____				
(STREET)	(CITY)	(STATE)	(ZIP CODE)	
WORK STATION ADDRESS: _____				
(STREET)	(CITY)	(STATE)	(ZIP CODE)	
HOME PHONE NO: _____		WORK STATION PHONE NO: _____		
CABINET OR AGENCY: _____				
NAME OF APPOINTING AUTHORITY: _____				

REPRESENTED BY ATTORNEY:	<input type="checkbox"/> NO	<input type="checkbox"/> YES
ATTORNEY'S NAME, ADDRESS AND PHONE NO: _____		

I AM A:	<input type="checkbox"/> Classified employee	<input type="checkbox"/> Unclassified employee
	<input type="checkbox"/> Applicant for employment	<input type="checkbox"/> Eligible on register

I AM APPEALING THE FOLLOWING ACTIONS: (Check appropriate box or boxes)		
<input type="checkbox"/> DISMISSAL	<input type="checkbox"/> DEMOTION	<input type="checkbox"/> SUSPENSION
<input type="checkbox"/> DISCIPLINARY FINE	<input type="checkbox"/> INVOLUNTARY TRANSFER	<input type="checkbox"/> LAYOFF
<input type="checkbox"/> EMPLOYEE EVALUATION	<input type="checkbox"/> REALLOCATION	<input type="checkbox"/> RECLASSIFICATION
<input type="checkbox"/> APPLICANT REJECTION	<input type="checkbox"/> DENIED, ABRIDGED OR	<input type="checkbox"/> DISCRIMINATION Circle those that apply [race, color, religion, ethnic origin, sex, disability, political, age (over 40)]
<input type="checkbox"/> REMOVAL FROM REGISTER	IMPEDED RIGHT TO INSPECT OR COPY RECORDS	
<input type="checkbox"/> OTHER PENALIZATION (Specify): _____		

CLASSIFIED, ELIGIBLE OR APPLICANT, PREPARE THIS SECTION

The following is a short, plain, and concise statement of the facts which relate to the action I am appealing:

UNCLASSIFIED EMPLOYEE, PREPARE THIS SECTION

The following is a short, plain, and concise statement of reason or cause given for dismissal or other penalization:

DATE OF RECEIPT OF NOTICE OF APPEALED ACTION: (Attach a copy of any written notice which you received relating to this Appeal.) _____

SIGNATURE

DATE

ATTORNEY'S SIGNATURE (if any)

DATE

For Official Use Only

THIS FORM IS TO BE MAILED OR DELIVERED TO:

KENTUCKY PERSONNEL BOARD
28 FOUNTAIN PLACE
FRANKFORT, KENTUCKY 40601

PRE-TERMINATION HEARING REQUEST FORM

INSTRUCTIONS:

As an employee who has been notified by the appointing authority of the intent to dismiss you, you have the right to appeal personally, or with counsel if you have retained counsel, at a pre-termination hearing to reply to the cabinet or agency head or his deputy or the appointing authority concerning the charge contained in the notice of intent to dismiss.

If you wish to request a pre-termination hearing, you must complete this form and submit it to the appointing authority (i.e., the person who signed the notice of intent to dismiss letter) within five (5) working days after you received the notice of intent to dismiss, excluding the day you received notification.

If you do not complete this form and submit it to the appointing authority within five (5) working days after you received the notice of intent to dismiss, it will be deemed that you have waived your right to a pre-termination hearing.

If you request a pre-termination hearing, the appointing authority will hold a pre-termination hearing within six (6) working days after receipt of your request, excluding the day your request is received. You will be notified as to the time and place of the pre-termination hearing.

The pre-termination hearing will be informal. You, either personally or with counsel, will be given the opportunity to respond to the charges contained in the notice of intent to dismiss.

Within five (5) working days of the pre-termination hearing, excluding the day of the pre-termination hearing, the appointing authority will determine whether to dismiss you or to alter, modify or rescind the intended dismissal. You will be notified, in writing, of this decision and of the reasons for this decision.

(KRS 18A.095)

I HEREBY REQUEST A PRE-TERMINATION HEARING TO REPLY TO THE CHARGES CONTAINED IN THE NOTICE OF INTENT TO DISMISS.

I ☐ WILL ☐ WILL NOT BE REPRESENTED BY COUNSEL.

SIGNATURE:

DATE:

I DO NOT WISH TO REQUEST A PRE-TERMINATION HEARING.

SIGNATURE:

DATE:

VOLUNTARY TRANSFER / DEMOTION / SALARY RETENTION AGREEMENT FORM

Pursuant to 101 KAR 2:034, Section 3 (2)(a) 1,2, (b), if an employee is demoted, the appointing authority shall determine the salary in one (1) of the following ways: (1) The employee's salary shall be reduced by five (5) percent for each grade the employee is reduced; or (2) **The employee shall retain the salary received prior to the demotion. If the employee's salary is not reduced upon demotion, the appointing authority shall explain the reason in writing and place the explanation in the employee's personnel file.**

(b) The employee whose salary is not reduced by five (5) percent per grade upon demotion shall not be eligible for a salary increase upon promotion, reclassification, detail to special duty or reallocation until he has moved to a job class with a higher pay grade than that from which he was demoted. If a promotion, reclassification, detail to special duty or reallocation occurs, it shall be deemed as having been made from the grade from which the employee has been demoted.

My signature below indicates that I understand the personnel regulation with regard to demotion and that I have read the terms as set forth in 101 KAR 2:034 and as described in this document. I understand that if I retain the salary received prior to demotion, I forfeit claims to a salary adjustment as the result of promotions, reclassifications, and detail to special duty assignments and reallocations until such time that promotions, reclassifications, detail to special duty assignments and reallocations exceed the pay grade from which I was demoted. I understand that this action does not affect my annual increment and that I will continue to receive same as approved by the Legislative and/or Executive Branch of Kentucky State Government. I understand and agree that all rights, grievance or appeal are waived and that the statements in this form represent the entire agreement relating to my voluntary transfer or demotion, superceding any oral agreements or other representations that may have been made by any person.

Effective Date of Action _____

State Reason(s) for requested Voluntary Transfer/Demotion _____

Note to agency: Please submit this form along with the personnel action to the Personnel Cabinet, Room 531, 5th Floor, 200 Fair Oaks Lane, Frankfort, KY 40601, prior to the effective date of the action. This document will be retained in the employee personnel file.

Check either the Voluntary Transfer and/or the Demotion box, complete the form, and sign on the designated line:

I, _____ a Merit employee of _____
(Name) (Agency)

do hereby accept **Voluntary Transfer** ☐, and/or **Voluntary Demotion** ☐ as indicated below and waive the right of appeal concerning the transfer/demotion. I will report to my new work station and/or accept a position in a lower classification.

	FROM:	TO:
Position #:		
Class Title:		
Grade & Salary:		
Increment Date:		
Cabinet:		
Department:		
Division:		
Branch/Section:		
Unit:		
Work County		
Work Week Code:		

Signature of Employee indicating acknowledgeable agreement _____ Date _____

Signature of Appointing Authority/Designee indicates approval and agreement _____ Date _____

Attachments: Letter of Justification from Appointing Authority

GRIEVANCE FORM

A GRIEVANCE IS A COMPLAINT CONCERNING A TERM OR CONDITION OF EMPLOYMENT OVER WHICH THE EMPLOYEE'S AGENCY HAS CONTROL. A GRIEVANCE MUST BE FILED WITHIN THIRTY (30) DAYS OF THE OCCURRENCE OR DISCOVERY OF THE EVENT. IF THIS GRIEVANCE CONCERNS AN ACTION APPEALABLE DIRECTLY TO THE PERSONNEL BOARD PURSUANT TO KRS 18A.095, YOUR RIGHT TO FILE AN APPEAL WITH THE PERSONNEL BOARD IS NOT EXTENDED BEYOND THE SIXTY (60) DAY APPEAL PERIOD OR OTHERWISE AFFECTED BY THE FILING OF A GRIEVANCE.

Please Print

NAME: _____ SOCIAL SECURITY NO: _____
(Last) (First)

JOB CLASSIFICATION: _____

(Department) (Division) (Branch) (Work Location) (Work Phone)

WHAT IS YOUR GRIEVANCE? (Please state facts and be specific as to the date, place and individuals involved. Attach additional pages as necessary.)

WHAT SPECIFIC SOLUTION DO YOU RECOMMEND TO RESOLVE YOUR GRIEVANCE?

☐ **In accordance with 101 KAR 1:375, Section 3, I choose to file this grievance with my second line supervisor.**

Employee's Signature: _____

Date: _____

FINDINGS AND DECISION OF SUPERVISOR: (Must be completed within five (5) work days of receipt of grievance.)

(Supervisor's Signature)	(Title)	(Date)
<input type="checkbox"/> I accept this decision.	<input type="checkbox"/> I appeal this decision to the next level. (Must be requested within two (2) work days of receipt of supervisor's decision.)	
	Employee's Signature: _____	
	Date: _____	

SECOND LEVEL REVIEW

FINDINGS AND DECISION:

(Signature)

(Title)

(Date)

☐ **I accept this decision.**☐ **I appeal this decision to the next level.**

(Employee's Signature)

(Date)

THIRD LEVEL REVIEW

FINDINGS AND DECISION:

(Signature)

(Title)

(Date)

☐ **I accept this decision.**☐ **I appeal this decision to the next level.**

(Employee's Signature)

(Date)

FINAL SUPERVISORY REVIEW

FINDINGS AND DECISION:

(Signature)

(Title)

(Date)

☐ **I concur with this decision.**☐ **I appeal this decision to the appointing authority for a final determination. (Must be filed within two (2) work days of final line supervisor's response.)**

(Employee's Signature)

(Date)

IF YOUR GRIEVANCE IS NOT APPEALABLE TO THE PERSONNEL BOARD UNDER THE PROVISIONS OF KRS 18A.095, THE DETERMINATION OF YOUR AGENCIES' APPOINTING AUTHORITY IS FINAL.

EXAMPLE LETTER #22 -- KRS 12.050

Note: The agencies headed by an elected official do not require this form.

[Date]

The Honorable _____
Governor of Kentucky
State Capitol
Frankfort, Kentucky 40601

Dear Governor _____:

As provided by KRS 12.050, this is to request your written approval of my appointment of **[Name]** to the post of Director, Division of **[Name]**, **[Agency]**, to be effective **[Date]**.

Sincerely,

[Secretary]

APPROVED:

GOVERNOR OF KENTUCKY

copy to: Secretary, Personnel Cabinet
Personnel File

EXAMPLE LETTER #23 -- WORK COUNTY CHANGE FORM
(To be used with Nature of Action Code M24)

[Date]

[Appointing Authority]

I **[Employee Name]** wish to be moved from work county **[Name]** to work county **[Name]**, effective **[Date]**.

Signed:

EMPLOYEE NAME

EXAMPLE LETTER #24 -- KRS 12.210

Note: The following departments do not require this letter:

Attorney General (31040)

Governor's Office (31090)

Lt. Governor's Officer (31085)

Public Advocacy (37515)

[Date]

By virtue of the authority vested in me by Section 12.210(1) of Kentucky Revised Statutes and as Governor of the Commonwealth of Kentucky, I (**Governor**), do hereby approve the employment of (**Name, Address of Employee**) as **[Title]** with the **[Agency]**, effective **[Date]**.

GOVERNOR

SECRETARY OF STATE

NOTIFICATION OF REALLOCATION

On _____, my manager explained to me that my job class/title has been changed
from _____
to _____
because _____

EMPLOYEE'S SIGNATURE

SOCIAL SECURITY NUMBER

As the supervisor of the above signed employee, I certify that I have notified the employee of this reallocation.

SUPERVISOR'S SIGNATURE

REQUEST FOR RECONSIDERATION OF REALLOCATION

If you believe that your new classification/title is incorrect and you wish to have it reconsidered:

- 1) Complete the bottom half of this form and return it to: Secretary of Personnel, 5th Floor, Suite 516, 200 Fair Oaks Lane, Frankfort, Kentucky 40601.
- 2) The form must be post marked within 10 working days of your being notified of the reallocation.
- 3) Please attach a copy of your P-1.
- 4) Please send a copy of this form to your agency's personnel manager.

I believe that my new classification/title is incorrect. I believe that I should be classified as a:

for the following reasons:

(Attach Additional Sheets if needed.)